

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0920-1026)

TITLE OF INFORMATION COLLECTION:

Ebola Treatment Unit (ETU) Training Course Evaluation

PURPOSE:

As part of a comprehensive and coordinated response to the 2014 Ebola outbreak in West Africa, the Centers for Disease Control and Prevention (CDC) has developed a 3- day training course for licensed clinicians intending to work in an Ebola Treatment Unit (ETU) in West Africa. The primary purpose of the course is to ensure that clinicians intending to provide medical care to patients with Ebola have sufficient knowledge of the disease and its transmission routes to work safely and effectively in a well-designed ETU. Through this course, CDC is providing an important service by preparing clinicians intending to deploy in response to the current Ebola outbreak.

The purpose of the course evaluation is to ensure that training and learning objectives are met. If deploying clinicians do not feel adequately prepared to work safely in an ETU in West Africa, then the course curriculum and/or training methods need to be modified to better achieve the objective. There is a course evaluation for each day of the 3 day course. Due to the diversity of the content and to ensure that each participant is meeting the day’s objectives and goals to ensure safety, all questions can be addressed at the time when participants are best able to provide accurate feedback. The information gathered will be used to evaluate the activities of the course, including the quality of the training lectures and exercises. The collected data are qualitative in nature and pertain to this particular training course.

DESCRIPTION OF RESPONDENTS:

The respondent pool includes each course participant. These respondents include federal government employees as well as individuals, such as clinicians, from the general public. Federal employees are not accounted for in the burden as they are acting within the scope of their employment.

TYPE OF COLLECTION: (Check one)

- | | |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | <input type="checkbox"/> Other: _____ |

CERTIFICATION:

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name: Priti Patel pgp0

To assist review, please provide answers to the following question:

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? Yes No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? Yes No
3. If Applicable, has a System or Records Notice been published? Yes No

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? Yes No

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
Individuals	400	5/60	33
Individuals	400	5/60	33
Individuals	400	15/60	100
Totals			166 hours

FEDERAL COST: The estimated annual cost to the Federal government is \$4,875

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

The selection of your targeted respondents

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe? Yes No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

The respondent universe includes all course participants. There is no sampling.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)
 Web-based or other forms of Social Media
 Telephone
 In-person
 Mail
 Other, Explain
2. Will interviewers or facilitators be used? Yes No

Attachment A – Day 1 Ebola Treatment Unit (ETU) Training Course Evaluation
Attachment B - Day 2 Ebola Treatment Unit (ETU) Training Course Evaluation
Attachment C - Day 3 Ebola Treatment Unit (ETU) Training Course Evaluation